

**REISSUE
PATENT APPLICATION
TRANSMITTAL**

Attorney Docket No.	236659US2RE
First Named Inventor	Katsuhisa YAMAMOTO
Original Patent Number	6,297,945
Original Patent Issue Date	October 2, 2001
Title	PORTABLE ELECTRONIC TERMINAL APPARATUS HAVING A PLURALITY OF DISPLAYS

21996 U.S. PTO
10/677170

APPLICATION FOR REISSUE OF: Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

1. Fee Transmittal Form
(Submit an original and a duplicate for fee processing)

ACCOMPANYING APPLICATION PARTS

7. Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).
8. Foreign Priority Claim (35 U.S.C. 119)
9. Information Disclosure Statement Copies of IDS (IDS)/PTO-1449 Citations (2)
10. English Translation of Reissue Oath/Declaration
11. Applicant claims small entity status. See 37 CFR 1.27.
12. Preliminary Amendment
13. White Advance Serial No. Postcard
14. Other:

2. Specification and claims (4 pages)

3. Drawing(s) (9 pages)

4. Reissue Oath or Declaration

5. Original U.S. Patent

Offer to surrender original patent

or Ribboned Original Patent Grant

Affidavit / Declaration of Loss

6. Original U.S. Patent currently assigned?

Yes No

if yes, check applicable boxes

Written Consent of all Assignees

37 C.F.R. §3.73(b) Statement

Power of Attorney

15. CORRESPONDENCE ADDRESS

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Signature: *Michael Monaco*

Date: 10/2/03

Name: Michael E. Monaco

Registration No.: 52,041

100203
18334
USPTO

REISSUE APPLICATION FEE TRANSMITTAL FORM				Docket Number 236659US2RE	
Claims as filed - Part 1					
Claims in Original Patent	For	Number Filed in Reissue Application	Number Extra	Rate	Fee
12	Total Claims	133	113	x \$18 =	\$2,034.00
2	Independent	13	11	x \$86 =	\$946.00
Basic Fee (37 CFR 1.16(h))					\$770.00
<input checked="" type="checkbox"/> Late Filing of Declaration					\$130.00
Total of above calculations					\$3,880.00
<input type="checkbox"/> Reduction by 50% for filing by small entity					\$0.00
					Total Filing Fee
					\$3,880.00

Please charge Deposit Account No. 15-0030 in the amount of \$0.00. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

A check in the amount of \$3,880.00 to cover the filing/additional fee is enclosed.

Credit card payment form is attached to cover the filing/additional fee in the amount of \$0.00

10/2/03

Date


Signature of Applicant, Attorney or Agent of Record

James J. Kulbaski

Typed or printed name

James J. Kulbaski
Registration Number 34,648

(OSMMN 05/03)

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